





Disbursement Form

(For receiving funds from TrustlNdiana)

Fax this form to TrustINdiana (1-800-765-7600) by 12:00pm Eastern Time on the Transaction Date.

Today's Date:/	/	Transaction #:(for TrustINdiana use)	
Transaction Date:/	/	(ror musulvalana use)	
Name of Public Entity:			
Name of Banking Institution:			
Bank Account #:			
Amount of Disbursement:	\$		
			DOLLARS
Name of TrustlNdiana Account :			
TrustlNdiana Account #:			
Authorized Signatory:	X (Sign here)		
Verification of Available Funds: (For Trust/Ndiana use)	 Yes	No	

If you need assistance completing this form, please call TrustINdiana Client Services at 1-800-395-5505.